

Questions & Answers about Health Reform Implementation in Washington

Health reform is here in Washington state. On Oct. 1, 2013, our online marketplace for new health coverage options, the Washington Healthplanfinder (www. WAhealthplanfinder.org), opened for business. Washingtonians can go there to shop for plans and find out if they qualify for low-cost or free health coverage. Coverage begins Jan. 1, 2014 – provided you complete your enrollment and pay your first premium by Dec. 23, 2013. Open enrollment continues through March 31, 2014. Here are answers to some of the most frequently asked questions.

What new coverage options are available?

There are two new coverage options available in Washington State under health reform:

- A new expansion of Medicaid (now called "Washington Apple Health") for adults age 19 to 64 with lower incomes. If you qualify, this coverage is free.
- New "Qualified Health Plans" from private insurers that meet new health reform standards and are state-approved to be sold through the Washington Healthplanfinder. If you qualify, there are subsidies in the form of advance federal tax credits to make these plans more affordable

When can I enroll?

You can apply for all forms of coverage available through Healthplanfinder during the first year of open enrollment between October 1, 2013 and March 31, 2014. Open enrollment periods will continue every year, but only from October through December. Individuals can enroll in Washington Apple Health and Apple Health for Kids through the Washington Healthplanfinder year round.

Note that the open enrollment period for Medicare is different than the open enrollment period for the new coverage options.

Where can I buy a health plan?

Washington Healthplanfinder (www.WAhealthplanfinder.org), is our state's new online health insurance marketplace. There, you can:

- Compare health plans, apples-to-apples, sideby-side
- See if you qualify for subsidies (advance tax credits) based on your income to help you afford coverage



- Choose from three levels of coverage with different levels of cost sharing
- Get free, unbiased assistance to help you understand your choices
- Renew your coverage for Family-based Medicaid or Apple Health for Kids.

You can also buy health insurance outside of the Healthplanfinder. However, the Washington Healthplanfinder is the only place you can access the financial assistance available due to health reform.

How much will it cost?

How much you'll pay for a health plan depends on whether you qualify for subsidies and on the plan you choose. All plans sold in the Washington Healthplanfinder have different levels of cost-sharing, or the



amount you pay for medical services versus the amount the insurance company pays. These are called "metal levels" and include bronze, silver and gold. Catastrophic plans with more limited coverage are available to individuals under the age of 30 and certain others.

Another important element of making health care affordable is the limit on out-of-pocket costs, such as deductibles and copays. The amount changes each year, and is currently \$6,250 for an individual and \$12,500 for a family. This limit applies to covered services, but does not include premiums.

Do I need to have health insurance?

By March 31, 2014 most people must have health insurance. The good news is that most people in Washington state already do, through their jobs, a public program like Medicare or Medicaid, or through individually purchased plans. But if you're one of the nearly 1 million people in our state who are uninsured or if you're struggling to pay for your insurance, you might qualify for new free or low-cost options. Here's how it works:

Requirement to have coverage

Health reform includes a new requirement that most people either have coverage or pay a penalty with their taxes. This requirement is important because if people wait until they get sick to get health coverage, then the costs of insurance for everyone would rise.

Financial help to afford coverage

New coverage options include new subsidies, or advance tax credits, to help Washington residents afford coverage. You could qualify for free coverage if you are: an adult aged 19 to 64 earning less than \$15,281 a year and are a legal resident of Washington state. You could qualify for reduced-cost coverage if you are: an individual earning less than \$45,960 a year or a family of four earning less than \$94,200. The amount is based on a sliding scale, depending on your income.

Penalties

If you don't have health insurance by March 31, 2014, most people will have to pay a penalty of \$95 per adult and \$47.50 per child, up to \$285 for a family *or* 1 percent of their household income, whichever is greater. The penalty increases to \$325 or 2 percent of household income in 2015 and \$695 or 2.5 percent of household income in 2016.

Who is NOT affected?

If you are already covered by your employer, are a senior or person with a disability who is on Medicare, or have health benefits through the Veterans Administration, your coverage is largely unaffected.

Where can I get help enrolling?

There are lots of places to get help navigating the Washington Healthplanfinder.

Toll-free helpline: 1-855-WA-FINDER (1-855-923-4633), TTY/TTD 1-855-627-9604.

In-person assisters or navigators

Organizations across the state are ready with staff trained to use the Washington Healthplanfinder. You can find an in-person assister to help you by calling the toll-free helpline or by visiting the Washington Health Benefit Exchange's Customer Support Network page:

http://www.wahbexchange.org/info-you/individuals-and-families/customer-support-network/.

There, you'll find contact info for the Lead Organizations, plus their extended networks of assistance organizations.





Brokers

Washington Healthplanfinder also offers assistance through registered Insurance Brokers. You can find a registered broker through www.WAhealthplanfinder.org. (Click on "Customer Support" in the upper right-hand corner of the home page for a drop-down menu that includes "Find a Broker.")

Community partners

Local community-based organizations, such as health centers, hospitals, and non-profit organizations have staff or volunteers trained to help you apply specifically for Washington Apple Health. Contact your local community-based organizations to see if assistance is available.

SHIBA volunteers

Volunteers through SHIBA (Statewide Health Insurance Benefit Advisers) provide free, unbiased and confidential assistance with health care choices. Contact SHIBA at 1-800-562-6900 for help near you.

The Department of Social and Health Services

DSHS offices around the state will be able to direct you toward help in using the Washington Healthplanfinder. You can also apply using an internet kiosk at local DSHS offices.

If you speak a language other than English or need disability accommodations, you can get free language and equal access services to help you apply.

What is Washington Apple Health and the Medicaid Expansion?

The Affordable Care Act increases Medicaid eligibility limits for adults, bringing health care coverage to thousands of adults in Washington State. Coverage for adults earning up to 138 percent of the federal poverty level will begin January 1, 2014. (The





household income limit for children's and pregnant women's programs remains at higher limits, and coverage can begin immediately.) In Washington State, Medicaid is called Washington Apple Health. You enroll through the Washington Healthplanfinder website, which will tell you if you qualify for Washington Apple Health, based on your income and other information.

Medicaid Eligibility, Beginning October 1, 2013*

If your family's income is at or less than the figures below, you probably qualify for Medicaid/Apple Health. You can apply beginning on October 1. If accepted, your coverage begins January 1, 2014.

1 person	2-person family	3-person family	4-person family	5-person family	6-person family	7-person family	8-person family
\$15,856	\$21,404	\$26,951	\$32,499	\$38,049	\$43,596	\$49,142	\$54,689

What's covered?

Some benefits of the Affordable Care Act are already in place, but a lot more begin on Jan. 1, 2014:

Preventive services

Most health plans must cover preventive services (www.healthcare.gov) with no cost-sharing. This means you won't pay a copay or coinsurance for certain medical services, such as immunizations and blood pressure screening.

Essential health benefits

Starting Jan. 1, 2014, all individual and small employer health plans must include the following 10 categories of essential health benefits: Ambulatory patient services, Hospitalization Emergency services, Maternity and newborn care, Mental health and treatment of substance abuse disorders including behavioral health treatment, Prescription drugs, Rehabilitative and habilitative services and devices, Preventive and wellness services and chronic disease management, Laboratory services, and Pediatric services including oral and vision care.

Coverage limits

Most health plans are not allowed to have annual benefit limits and none are allowed to have lifetime benefit limits.

How will health reform affect Washington residents currently enrolled in medical coverage programs?

If you currently have health coverage through HCA or DSHS programs such as Medicaid, Basic Health, Apple Health for Kids, or state programs for people with disabilities or substance use issues, you may notice some changes in Fall 2013 and Winter 2014. In most cases, these changes will not affect your benefits, insurance plan, or doctors. But, you may notice that the name for your coverage has changed, or that you now need to renew your coverage in a new way.

If you are currently receiving medical coverage through a state or federal program, you will receive a letter in the mail, telling you what you need to do to maintain your coverage. In some cases you will need to visit Washington Healthplanfinder to reapply for or renew your coverage.